

Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
2010 Non-Judicial Election

RECEIVED

JAN 27 2011

Secretary of State
Capitol Office
DATE STAMP

Name of Candidate Donnie BellAddress 836 Tucker Rd. Fulton, MS 39443Telephone 662-762-3385 Fax —Contact Name Donnie Bell Email dbell@house.ms.govOffice Sought _____ Political Party Democrat
☐ Check here if above is different from previous report

TYPE OF REPORT

- ____ May 25, 2010 Pre-Election Report (January 1, 2010, through May 22, 2010)..... Mandatory
- ____ June 15, 2010 Pre-Runoff Report (May 23, 2010, through June 12, 2010)..... Runoff Candidates
- ____ October 26, 2010 Pre-General Report (May 23, 2010, through October 23, 2010)..... All Candidates
- ____ November 16, 2010 Pre-Runoff Report (October 24, 2010, through November 13, 2010)..... Runoff Candidates
- ☒ January 31, 2011 Annual Report (January 1, 2010, through December 31, 2010)..... All Candidates and Political Committees

____ Termination Report (Candidate will no longer accept contributions or make campaign expenditures and has no outstanding campaign debt obligation) Required to terminate reporting obligations

IMPORTANT

- (1) Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.
- (2) Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).
- (3) The receiving authority must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

	Itemized + Non-Itemized =	This Period	Calendar Year-To-Date
Total amount of contributions	\$ 8400 + \$ 500	\$ 8900	\$ 8900
Total amount of disbursements	\$ 4257 + \$ 592.50	\$ 4850	\$ 4850
Total amount of cash on hand		\$ 6046.00	

I certify that I have examined this report and to the best of my knowledge and belief it is true, accurate, and complete.

Donnie Bell
Signature of Candidate

1-27-11
Date

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirements.

Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. §§ 23-15-811 and 813 (1972).

SEND TO: 1. Candidates for Statewide, State district, multi-county and all legislative offices should return form to Secretary of State, Elections Division, P. O. Box 136, Jackson, MS 39206 or fax to 601-359-1489 or 601-676-2819.

2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.

Name of Candidate or Committee Donnie Bell
 Reporting period 1-29-10 through 1-29-11

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>GREG WARD</u>		<u>8/10/10</u>	\$ <u>200.00</u>
Mailing Address <u>670 Hwy 4 West</u>		<u> </u> <u> </u> <u> </u>	\$
City, State, Zip Code <u>Ripley, MS 39663</u>		<u> </u> <u> </u> <u> </u>	\$
Name of Employer (Required) <u>SELF</u>		<u> </u> <u> </u> <u> </u>	\$
Occupation (Required) <u>Representative</u>		Aggregate year-to-date	\$ <u>200.00</u>
B. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>BNSF Railway Co.</u>		<u>5/12/10</u>	\$ <u>250.00</u>
Mailing Address <u>2500 Lou Menk Dr. AOB-3</u>		<u> </u> <u> </u> <u> </u>	\$
City, State, Zip Code <u>Fort Worth, TX 76131</u>		<u> </u> <u> </u> <u> </u>	\$
Name of Employer (Required)		<u> </u> <u> </u> <u> </u>	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>250.00</u>
C. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Grand Trunk Western Railroad Co</u>		<u> </u> <u> </u> <u> </u>	\$ <u>250.00</u>
Mailing Address <u>2400 Livernois suite 300 P.O. 5025</u>		<u> </u> <u> </u> <u> </u>	\$
City, State, Zip Code <u>Troy Michigan 48007-5025</u>		<u> </u> <u> </u> <u> </u>	\$
Name of Employer (Required)		<u> </u> <u> </u> <u> </u>	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>250.00</u>
D. Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>AT&T PAC.</u>		<u> </u> <u> </u> <u> </u>	\$ <u>500.00</u>
Mailing Address <u>175 E Capital St. Landmark Ct. Rm 703</u>		<u> </u> <u> </u> <u> </u>	\$
City, State, Zip Code <u>Jackson MS 39201</u>		<u> </u> <u> </u> <u> </u>	\$
Name of Employer (Required)		<u> </u> <u> </u> <u> </u>	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>500.00</u>

Name of Candidate or Committee Donnie Bell
 Reporting period 1-29-10 through 1-29-11

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>FRANKIE WALLACE</u>	<u>12/2/10</u>	\$ <u>500.00</u>
Mailing Address <u>P.O. Box 966</u>	<u> 1 1 </u>	\$
City, State, Zip Code <u>Fulton, MS 38843</u>	<u> 1 1 </u>	\$
Name of Employer (Required) <u>SELF</u>	<u> 1 1 </u>	\$
Occupation (Required) <u>Business (rental)</u>	Aggregate year-to-date	\$ <u>500.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Larry Montgomery & Delois Montgomery</u>	<u>12/1/10</u>	\$ <u>1,000.00</u>
Mailing Address <u>101 Francis Drive</u>	<u> 1 1 </u>	\$
City, State, Zip Code <u>Fulton, MS</u>	<u> 1 1 </u>	\$
Name of Employer (Required) <u>SELF</u>	<u> 1 1 </u>	\$
Occupation (Required) <u>LEAN Business</u>	Aggregate year-to-date	\$ <u>1,000.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>GARY FRANKS</u>	<u>12/1/10</u>	\$ <u>250.00</u>
Mailing Address <u>P.O. Box 355</u>	<u> 1 1 </u>	\$
City, State, Zip Code <u>Fulton MS 38843</u>	<u> 1 1 </u>	\$
Name of Employer (Required) <u>SELF</u>	<u> 1 1 </u>	\$
Occupation (Required) <u>ACCOUNTANT</u>	Aggregate year-to-date	\$ <u>250.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>JOHNNY CLANE & DESSIE LYNN CLANE</u>	<u>12/1/10</u>	\$ <u>1500.00</u>
Mailing Address <u>P.O. Box 424</u>	<u> 1 1 </u>	\$
City, State, Zip Code <u>Fulton, MS 38843</u>	<u> 1 1 </u>	\$
Name of Employer (Required) <u>SELF</u>	<u> 1 1 </u>	\$
Occupation (Required) <u>CONSTRUCTION</u>	Aggregate year-to-date	\$ <u>1500.00</u>

Name of Candidate or Committee Donnie Bell
 Reporting period 1-29-10 through 1-29-11

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Eric Holland</u>	<u>12/1/10</u>	\$ <u>1000.00</u>
Mailing Address <u>P.O. Box 127</u>	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code <u>Fulton MS 39443</u>	<u> </u> / <u> </u> / <u> </u>	\$
Name of Employer (Required) <u>Sunshine Air Conditioning Home</u>	<u> </u> / <u> </u> / <u> </u>	\$
Occupation (Required) <u>owner</u>	Aggregate year-to-date	\$ <u>1000.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full name <u>SK Land Company</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u>200.00</u>
Mailing Address <u>P.O. Box 273</u>	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code <u>Fulton MS 39443</u>	<u> </u> / <u> </u> / <u> </u>	\$
Name of Employer (Required)	<u> </u> / <u> </u> / <u> </u>	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>200.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full name <u>Tommy Davis</u>	<u>1/2/11</u>	\$ <u>500.00</u>
Mailing Address <u>132 C.R. 124</u>	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code <u>Houma MS 39450</u>	<u> </u> / <u> </u> / <u> </u>	\$
Name of Employer (Required)	<u> </u> / <u> </u> / <u> </u>	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>500.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		
Full name	<u> </u> / <u> </u> / <u> </u>	\$
Mailing Address	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code	<u> </u> / <u> </u> / <u> </u>	\$
Name of Employer (Required)	<u> </u> / <u> </u> / <u> </u>	\$
Occupation (Required)	Aggregate year-to-date	\$

Name of Candidate or Committee Downie BellReporting period 1-29-10 through 1-29-11

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Mr. & Mrs. Chip Crane</u>		<u>12/1/10</u>	\$ <u>500.00</u>
Mailing Address <u>P.O. Box 424</u>		<u>1/1/</u>	\$
City, State, Zip Code <u>Fulton MS 39443</u>		<u>1/1/</u>	\$
Name of Employer (Required) <u>F.I. Crane</u>		<u>1/1/</u>	\$
Occupation (Required) <u>owner</u>		Aggregate year-to-date	\$ <u>500.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>William D. Hoine</u>		<u>12/1/10</u>	\$ <u>250.00</u>
Mailing Address <u>2205 Hoins Crossing Rd</u>		<u>1/1/</u>	\$
City, State, Zip Code <u>Tremont MS 38576-9114</u>		<u>1/1/</u>	\$
Name of Employer (Required) <u>Rigon</u>		<u>1/1/</u>	\$
Occupation (Required) <u>sales</u>		Aggregate year-to-date	\$ <u>250.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Kenneth Petre</u>		<u>12/1/10</u>	\$ <u>250.00</u>
Mailing Address <u>P.O. Box 754</u>		<u>1/1/</u>	\$
City, State, Zip Code <u>Fulton, MS 39443</u>		<u>1/1/</u>	\$
Name of Employer (Required) <u>ITAWAKA Investments</u>		<u>1/1/</u>	\$
Occupation (Required) <u>MANAGER</u>		Aggregate year-to-date	\$ <u>250.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Luke Montgomery</u>		<u>12/1/10</u>	\$ <u>1000.00</u>
Mailing Address <u>P.O. Box 37</u>		<u>1/1/</u>	\$
City, State, Zip Code <u>Fulton, MS</u>		<u>1/1/</u>	\$
Name of Employer (Required) <u>title loans</u>		<u>1/1/</u>	\$
Occupation (Required) <u>owner</u>		Aggregate year-to-date	\$ <u>1000.00</u>

Name of Candidate or Committee Donnie Bell
 Reporting period 1/29/10 through 1-29-11

ITEMIZED DISBURSEMENTS

A. Full name <u>Donnie Bell</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>736 Fulton, MS 38843</u>	<u>1/15/10</u>	\$ <u>1400.00</u>
City, State, Zip Code	<u>12/19/10</u>	\$ <u>200.00</u>
Purpose of Disbursement (Optional) <u>Loan Repayment</u>	Aggregate Year-to-date	\$ <u>1600.00</u>
B. Full name <u>ITA Co. Times</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>Main St Fulton, MS 38843</u>	<u>3/19/10</u>	\$ <u>56.00</u>
City, State, Zip Code	<u>7/22/10</u>	\$ <u>50.00</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
C. Full name <u>ITA Times</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>9/29/10</u>	\$ <u>50.00</u>
City, State, Zip Code	<u>10/29/10</u>	\$ <u>75.00</u>
Purpose of Disbursement (Optional) <u>Ads</u>	Aggregate Year-to-date	\$
D. Full name <u>ITA Times</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>12/15/10</u>	\$ <u>117.50</u>
City, State, Zip Code	<u>1/1/11</u>	\$
Purpose of Disbursement (Optional) <u>Ads</u>	Aggregate Year-to-date	\$ <u>348.50</u>
E. Full name <u>Dulaney's Grocery</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>1300 East Main</u>	<u>10/27/10</u>	\$ <u>159.09</u>
City, State, Zip Code <u>Fulton MS 38843</u>	<u>11/10/10</u>	\$ <u>192.00</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>351.09</u>
F. Full name <u>Kudzu Pottery</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>Cummings St.</u>	<u>12/19/10</u>	\$ <u>400.00</u>
City, State, Zip Code <u>Fulton, MS 38843</u>	<u>1/1/11</u>	\$
Purpose of Disbursement (Optional) <u>Promotional items</u>	Aggregate Year-to-date	\$ <u>400.00</u>

Name of Candidate or Committee Donnie Bell

Reporting period 1-29-10 through 1-29-11

ITEMIZED DISBURSEMENTS

A. Full name ITA Touchdown Club.		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 5 Hwy 25 Fulton MS 38443		2/13/10	\$ 300.00
City, State, Zip Code		___/___/___	\$
Purpose of Disbursement (Optional) Football Program Ad		Aggregate Year-to-date	\$
B. Full name Fulton Country Club Jr. Golf Assoc.		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address Country Club Rd Fulton, MS		8/8/10	\$ 500.00
City, State, Zip Code		___/___/___	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$
C. Full name Dulaney's Grocery		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1300 Eastmain		1/7/10	\$ 332.33
City, State, Zip Code Fulton MS		___/___/___	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$ 332.33
D. Full name J.C. Penny's		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address MAIL		1/11/11	\$ 425.77
City, State, Zip Code Jackson, MS		___/___/___	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$ 425.77
E. Full name		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		___/___/___	\$
City, State, Zip Code		___/___/___	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$
F. Full name		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		___/___/___	\$
City, State, Zip Code		___/___/___	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$